



Docket No.: AIJ-001CP3
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Anne Marie CHALMERS

Art Unit: 3764

Application No.: 10/787278

Examiner: Not Yet Assigned

Filed: February 26, 2004

For: MEDICATION DELIVERY DEVICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

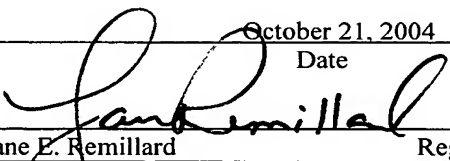
NOTIFICATION OF CHANGE OF ATTORNEY DOCKET NUMBER

Dear Sir:

The Attorney Docket Number of the above-identified patent application has changed. Please take notice that the *correct* Attorney Docket Number for this application should now be as follows:

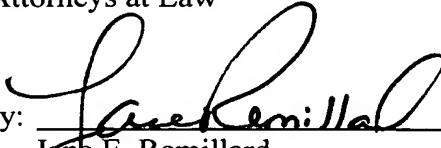
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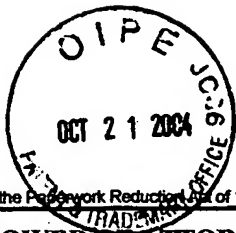
Please reference **AIJ-001CP3** on all future correspondence and direct all correspondence per power of attorney filed concurrently herewith to the principal attorney of record, Jane E. Remillard, Esq., LAHIVE & COCKFIELD, LLP, 28 State Street, Boston, Massachusetts 02109.

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	October 21, 2004 Date
Jane E. Remillard	Registration No. 38,872

LAHIVE & COCKFIELD, LLP

Attorneys at Law

By: 
Jane E. Remillard
Registration No. 38,872
Attorney for Applicants



PTO/SB/80 (12-03)

Approved for use through 11/30/2005. OMB 0651-0035

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00959

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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

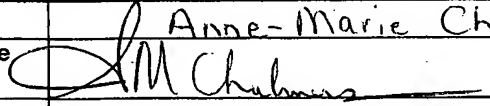
Assignee Name and Address:

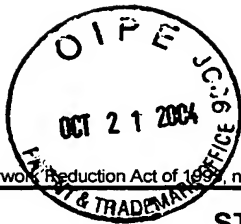
Ambo Innovation LLC
1721 S. Creek Drive
Suite 203
Osprey, Florida 34299

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Anne-Marie Chalmers		
Signature		Date	10 08 04
Title	Authorized Signer for Assignee	Telephone	



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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Anne Marie CHALMERSApplication No./Patent No.: 10/787278Filed/Issue Date: February 26, 2004Entitled: MEDICATION DELIVERY DEVICEAmbo Innovation LLC

(Name of Assignee)

, a

Limited Liability Company

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.

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in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015031, Frame 0375, or for which a copy thereof is attached.

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B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

October 21, 2004

Date

Telephone NumberJane E. Remillard, Reg. No. 38,872

Typed or printed name

Jane E. Remillard
Signature

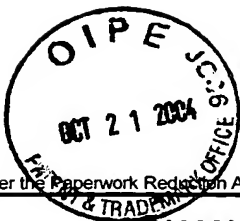
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(Jane E. Remillard)



PTO/SB/122 (09-04)

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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/787278
	Filing Date	February 26, 2004
	First Named Inventor	Anne Marie CHALMERS
	Art Unit	3764
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	AIJ-001CP3

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number:

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<input type="checkbox"/> Firm or Individual Name	Jane E. Remillard LAHIVE & COCKFIELD, LLP			
Address	28 State Street			
City	Boston	State	MA	Zip 02109
Country	US			
Telephone	(617) 227-7400		Fax	(617) 742-4214

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I am the:

- ☐ Applicant/Inventor
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 38,872
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed Name

Jane E. Remillard

Date October 21, 2004

Telephone (617) 227-7400

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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